

CHARLES COUNTY GOVERNMENT
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE

Schedule No.

C-832

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Agency
CHARLES COUNTY GOVERNMENT

Division/Unit
COMMUNITY SERVICES

Item No.	Description	Retention
1	GENERAL CORRESPONDENCE Files contain letters, memorandums, informational materials, correspondence/documents of the department and its divisions.	Screen annually. Destroy material having no further administrative, fiscal, legal, or operational value. Retain permanently any material that serves to document the origin, development, and accomplishments of the department or its divisions. Transfer periodically to the MD State Archives.
2	TIME AND ATTENDANCE Files may contain some or all of the following: time sheets, leave requests, leave records, comp time requests/approvals, etc.	Retain for 3 years, then destroy.
3	FULL-TIME EMPLOYEE PERSONNEL RECORDS Files contain evaluations, awards, training, written correspondence, etc.	Retain for 3 years after termination, then destroy.
4	PART-TIME EMPLOYEE PERSONNEL RECORDS Files contain part-time agreements, applications, references, work permits, county, state and federal employment-related forms, evaluations, letters, etc.	Retain for 3 years after termination, then destroy.

Schedule Approved by Department,
Agency, or Division Representative
Date 6/15/98

Signature Eugene T. Lauer
Typed Name Eugene T. Lauer
Title County Administrator

Schedule Authorized by State Archivist

Date JUN 22 1998

Signature

Edward C. [Signature]

CHARLES COUNTY GOVERNMENT
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE

(Continuation Sheet)

Schedule No.

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Agency
CHARLES COUNTY GOVERNMENT

Division/Unit
COMMUNITY SERVICES

Item No.	Description	Retention
5	FSICAL YEAR BUDGETS Files contain budget expenditures, invoices, purchase orders, check requests, expense tracking, etc.	Retain for 3 years, then destroy.
	<u>AGING DIVISION FILES</u>	
1	CONFIDENTIAL SENIOR CARE FILES Files include confidential client care information, authorizations, legal documents, etc.	Retain until service is terminated plus 3 years, and until audit requirements have been fulfilled, then destroy.
2	CONFIDENTIAL GUARDIANSHIP FILES Files include confidential client information, case management documentation, letters, legal reports, etc.	Retain until guardianship is terminated plus 3 years, and until audit requirements have been fulfilled, then destroy.
3	GRANT FILES Files contain applications, financial reports, requests for funds, letters, memorandums, management documents, etc.	Retain for the life of the grant plus 3 years, and until audit requirements have been fulfilled, then destroy.
	<u>HOUSING AND COMMUNITY DEVELOPMENT DIVISION FILES</u>	
1	MPDU PROGRAM BY DEVELOPMENT Development agreements, correspondence, program documents, applications, client files, etc.	Retain until date specified in the development agreement; obtain Chief of H&CD approval, then destroy.
2	GRANTS Administrative files, subrecipient files, contracts, leases, HUD forms, authorizations, applications, agreements, management documentation, etc.	Retain for the life of the grant plus 6 years, and until audit requirements have been fulfilled, then destroy.

CHARLES COUNTY GOVERNMENT
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Division/Unit
COMMUNITY SERVICES

Item No.	Description	Retention
	<u>HOUSING AND COMMUNITY DEVELOPMENT DIVISION, CONT.</u>	
3	HOUSING COMMISSION OF CHARLES COUNTY, MD Files contain correspondence, reports, workshops, budget files, meeting materials, minutes and reference library.	Permanent; transfer periodically to the Maryland State Archives Office.
4	SECTION 8 PROGRAM WAITING LIST Files contain any and all information/applications for admission to the program and associated documentation.	File is on-going. Files related to applicants selected from waiting list become part of Section 8 client files; files related to ineligible applicants may be purged from list 10 years after determination of ineligibility.
5	LIVABILITY CODE Files contain information related to livability code inspections, inspection forms, letters to owners, etc.	Retain for 6 years after no longer active, then destroy. Obtain Chief of H&CD approval before destroying.
6	SPECIAL LOANS Files contain current applicants, current participants, closed files.	Retain for 5 years, and until audit requirements have been fulfilled, then destroy.
7	FEDERAL REGISTERS Daily Federal Registers, LSA, and Federal Debarred Booklets.	Retain until updated or superceded, then destroy.
	<u>RECREATION DIVISION FILES</u>	
1	FACILITIES USAGE Files contain permit information/approvals, equipment lists, building repairs and improvements, maintenance requests, reports, building usage, staffing requirements, etc.	Retain for 3 years, then destroy.

CHARLES COUNTY GOVERNMENT
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE

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Schedule No.

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Agency
CHARLES COUNTY GOVERNMENT

Division/Unit
COMMUNITY SERVICES

Item No.	Description	Retention
	<u>RECREATION DIVISION, CON'T.</u>	
2	PROGRAMS Files include general information and correspondence, rosters, planning sheets, staffing information, registration forms, mailing lists, travel information. Guide information, rules, schedules, etc.	Retain for 3 years, then destroy.
3	SPECIAL OLYMPICS Files include general information, correspondence, program records, team rosters, training schedules, staff and volunteer listings, equipment listings, newsletters, games information, athletes' and partners' medical information and releases, etc.	Retain for 3 years, then destroy.
4	GRANTS Applications, correspondence/approvals from state agencies, reports, financial records, etc. for various recreational program grants.	Retain for the life of the grant plus 5 years, and until audit requirements have been fulfilled, then destroy.

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>1</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program All	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title General Correspondence		5. Earliest Year / Latest Year 1974 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain letters, memorandums, informational materials, any correspondence/documents of the department and its divisions.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>208</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) 10. Annual <u>15</u> Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Screen annually. Destroy material having no further administrative, fiscal, legal, or operational value. Retain permanently any material that serves to document the origin, development and accomplishments of the department or its divisions.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>2</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program All	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Time and Attendance		5. Earliest Year / Latest Year 1986 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain time sheets, leave records, comp time requests/approvals, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>5</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) 10. Annual <u>1</u> Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, specify agency or office) Personnel Office	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for 3 years after termination, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>3</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program All	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Full-Time Employee Personnel Records		5. Earliest Year / Latest Year 1986 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain evaluations, awards, training, written correspondence, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <u>7</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual <u>1</u> Number Accumulation <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, specify agency or office) Personnel Office	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for 3 years after termination, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>4</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program All	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Part-Time Employee Personnel Records		5. Earliest Year / Latest Year <u>1989</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files may include part-time agreements, applications, references, work permits, Authorization to Hire forms, Position Control forms, related correspondence, position evaluations, letters of resignation, and State and Federal employment-related forms.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <u>7</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation <u>1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) Personnel/Privacy issues		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for 3 years after termination, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>5</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program All	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Fiscal Year Budgets		5. Earliest Year / Latest Year 1980 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files include budget information and reports, budget transfers, copies of invoices, requisitions, journal entries, budget tracking analysis spreadsheets, computer printouts of deposits to Treasurer's Office, refund reports and information, tracking logs for Discount Tickets, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume 30 Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation 6 Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for 3 years, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113	
21. Date April 9, 1998			

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>6</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Aging	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Confidential Senior Care Files		5. Earliest Year / Latest Year 1988 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain confidential client information, care plans, authorization letters, time records, case management documentation, ranking scales, service records, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <u>6</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation <u><1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after N/A _____ Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) State		16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain until service is terminated plus 3 years, or until audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113	
21. Date April 9, 1998			

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>7</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Aging	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Confidential Guardianship Files		5. Earliest Year / Latest Year <u>1986</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain confidential client information, legal documents, case management documentation, letters, service records, review board reports, court reports, etc.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <u>1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation <u><1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after <u>N/A</u> _____ Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) State		16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain until guardianship is terminated plus 3 years, or until audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113		21. Date April 9, 1998

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>8</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Aging	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Grants		5. Earliest Year / Latest Year <u>1994</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain grant applications, financial reports, requests for funds, letters, memorandums, management documents, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>6</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ 10. Annual <u>1</u> Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain for the life of the grant plus 3 years, or until audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.				AGENCY RECORDS INVENTORY	
				Page <u>9</u> of <u>19</u>	
1. Department/Agency Charles County Govt.		2. Division Community Services		3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.					
4. Record Series Title MPDU Program by Development				5. Earliest Year / Latest Year 1994 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) MPDU (Moderately Priced Dwelling Unit) Files contain development agreements, correspondence, program documents, applications, client files, etc.					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <u>1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		10. Annual Accumulation <u><1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____			
12. File becomes inactive after <u>N/A</u> Month(s) Year(s)		13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677			
14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)		15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) Exemption 6 of Freedom of Information Act: payroll, applicants' income statements, etc.			
16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County		17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x			
18. Recommended retention Retain until date specified in the development agreement; obtain Chief of H&CD approval; then destroy.		19. Name and Title of Preparer Betty J. Windsor Secretary II			
20. Telephone Number 301-934-0113		21. Date April 9, 1998			

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY	
		Page <u>10</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Grants		5. Earliest Year / Latest Year <u>1978</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Administrative files, subrecipient files, Housing Assistance Payment contracts, Tenant/Landlord leases, HUD forms, Authorizations for Release of Information, grant applications, agreements, management documents, etc.			
7. Record Series Format(s)		8. Record Series Sequence	9. Volume <u>131</u> Number
<input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	<input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>10</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) Federal and State		16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Retain for the life of the grant plus 6 years, or until audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113		21. Date April 9, 1998

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>11</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Housing Commission of Charles County, Maryland		5. Earliest Year / Latest Year <u>1991</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Correspondence, reports, workshops, budget files, meeting materials/documents, minutes and reference library.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>10</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ Shelves 10. Annual <u>1</u> Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ Shelf	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after N/A _____ Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) x x		18. Recommended retention Permanent; transfer periodically to the Maryland State Archives Office.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>12</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Section 8 Program Waiting List		5. Earliest Year / Latest Year ? to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain some or all of the following: Preliminary applications for admission to Section 8 Program. Families are selected from the waiting list for enrollment in the program when certificates/vouchers become available.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>4</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ <hr/> 10. Annual <u><1</u> Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after N/A Month(s) Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) Federal and State		16. Audit Requirements <input type="checkbox"/> None <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> Independent County	
17. Is an index system used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) Nan McKay computer software maintains listing alphabetically and numerically.		18. Recommended retention On-going file. File related to applicants selected from waiting list become part of Section 8 client files; files related to ineligible applicants may be purged from list 10 years after determination of ineligibility.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY	
		Page <u>13</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Livability Code		5. Earliest Year / Latest Year ? to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain some or all of the following: information related to livability code inspections, inspection forms, letters to owners, etc.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input checked="" type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
		9. Volume <u>2</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
		10. Annual Accumulation <u><1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after <u>N/A</u> _____ Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) Federal; Privacy Act		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, explain briefly and describe any hardware/software) Cross-referenced by owner's name and map/parcel; System is manual		18. Recommended retention Retain for six years after no longer active; then destroy. Obtain Chief of H&CD approval prior to disposal.	
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113	
		21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>14</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Special Loans		5. Earliest Year / Latest Year <u>1992</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files contain some or all of the following: current applicants, current participants, closed files.			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
9. Volume <u>8</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____		10. Annual Accumulation <u>1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>10</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) and regulation(s)) State and Federal		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain for 5 years or until all audit requirements have been fulfilled, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113	
21. Date April 9, 1998			

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>15</u> of <u>19</u>	
1. Department/Agency Charles County Govt.		2. Division Community Services	
		3. Unit/Program Housing & Comm. Dev.	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Federal Registers		5. Earliest Year / Latest Year <u>1997</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Daily Federal Registers, LSA, and Federal Debarred Booklets			
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input checked="" type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	
		9. Volume <u>1</u> Number <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ Shelf 10. Annual Accumulation _____ Number <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (specify) _____ None	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after <u>6</u> Month(s) _____ Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain until updated or superceded, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113	
		21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY	
		Page <u>16</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Recreation	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Facilities Usage		5. Earliest Year / Latest Year 1989 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files include permit information/approvals, equipment lists, building repairs/improvements, maintenance requests, reports, building usage, staffing requirements, etc.			
7. Record Series Format(s)		8. Record Series Sequence	9. Volume <u>9</u> Number
<input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input checked="" type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		<input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input checked="" type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	<input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		10. Annual Accumulation <u>3</u> Number	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		<input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		12. File becomes inactive after each season _____ Month(s) _____ Year(s)	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
19. Name and Title of Preparer Betty J. Windsor Secretary II		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
20. Telephone Number 301-934-0113		18. Recommended retention Retain for 3 years, then destroy.	
		21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>17</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Recreation	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Programs		5. Earliest Year / Latest Year <u>1990</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files include general information and correspondence, rosters, planning sheets, staffing information, registration forms, mailing lists, travel information, Guide information, rules, schedules, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input checked="" type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>20</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ 10. Annual Accumulation <u>6</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain for 3 years, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.		AGENCY RECORDS INVENTORY Page <u>18</u> of <u>19</u>	
1. Department/Agency Charles County Govt.	2. Division Community Services	3. Unit/Program Recreation	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.			
4. Record Series Title Special Olympics		5. Earliest Year / Latest Year <u>1990</u> to <u>Present</u>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files may include general information, correspondence, program records, team rosters, training schedules, staff and volunteer listings, equipment listings, newsletters, United Way correspondence, games information, athletes' and partners' medical information & releases, etc.			
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input checked="" type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____	8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume <u>7</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____ <hr/> 10. Annual Accumulation <u>1.5</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input checked="" type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)	
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County	
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain for 3 years, then destroy.	
19. Name and Title of Preparer Betty J. Windsor Secretary II	20. Telephone Number 301-934-0113	21. Date April 9, 1998	

Instructions -- Type or print a separate form for each new or revised record series.				AGENCY RECORDS INVENTORY	
				Page <u>19</u> of <u>19</u>	
1. Department/Agency Charles County Govt.		2. Division Community Services		3. Unit/Program Recreation	
DEFINITION: Record Series: a group of related records normally filed and used as a unit for reference as well as retention & disposition purposes.					
4. Record Series Title Grants				5. Earliest Year / Latest Year 1989 to Present	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) Files include applications, correspondence/approvals from state agencies, reports, financial records, etc. for various recreational program grants.					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____		9. Volume <u>1</u> Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) _____	
11. File is used: <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		12. File becomes inactive after _____ Month(s) <u>1</u> Year(s)			
13. Current Location(s) (Building, Floor, Room) Department of Community Services Building Port Tobacco, MD 20677		14. Is record series duplicated elsewhere? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, specify agency or office)			
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) and regulation(s))		16. Audit Requirements <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent County			
17. Is an index system used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, explain briefly and describe any hardware/software)		18. Recommended retention Retain for the life of the grant plus 5 years, or until audit requirements have been fulfilled, then destroy.			
19. Name and Title of Preparer Betty J. Windsor Secretary II		20. Telephone Number 301-934-0113		21. Date April 9, 1998	